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CORRENT CORRESPON		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.					
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Whitestone, NY						······	(Depositor's name)
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							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNBY DOCKET NO.	CONFIRMATION NO.
10/650,365 FITLE OF INVENTION	08/28/2003 J: RECOMBINANT SUI	PER-COMPOUND INTE	Guangwen Wei ERFERON		#7	92-A-PCT-US	7677
APPLN, TYPE	SMALL ENTITY	ISSUB FRE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	B FRE	TOTAL FBB(S) DUE	DATE DUE
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PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG Sichuan Biotechno	ess an assignee is identi in 37 CFR 3.11. Comp ENEE ology Research Co	enter	data will appear on the f a substitute for filing a (B) RESIDENCE; (CI Sichuan, P.R. Cl	patent. If an assign an assignment. TY and STATE OR C	OUNT:	RY)	rument has been filed for
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a. Applicant claims	s (from status indicated SMALL ENTITY status	s. See 37 CFR 1.27.	b. Applicant is no lo	nger claiming SMAL	L ENT	ITY status. See 37 CFI	t 1.27(g)(2). assignee or other party in
erest as shown by the re	cords of the United State	es Patent and Trademark	Office.	the applicant; a regis	tered a	ttorney or agent; or the	assignee or other party in
Authorized Signature _	aller was	Rie Ola		_{Date} March	ı 7, 2	800	
Typed or printed name	Albert Wai-Kit	Registration No. 36,479					
is collection of informat application. Confidentia omitting the completed a s form and/or suggestion x 1450, Alexandria, Vir	ion is required by 37 CF ality is governed by 35 U application form to the as for reducing this burd ginia 22313-1450. DO	R 1.311. The information J.S.C. 122 and 37 CFR 1 USPTO. Time will vary of len, should be sent to the NOT SEND FEES OR C	n is required to obtain on 14. This collection is elepending upon the ind Chief Information Office OMPLETED FORMS	retain a benefit by th stimated to take 12 m ividual case. Any con cer, U.S. Patent and 1 TO THIS ADDRESS	e publi inutes nments fradem: SEND	c which is to file (and be to complete, including on the amount of time ark Office, U.S. Depar	by the USPTO to process) gathering, preparing, and by you require to complete ment of Commerce, P.O. r Patents, P.O. Box, 1450

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7.	590 12/12	/2007			•				
Albert Wai-Kit (Law Offices of All World Plaza, Suite 141-07 20th Aven	bert Wai-Kit Cha 604	n, LLC	I h Sta ad tra	Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENT		₹.	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
10/650,365	08/28/2003		Guangwen Wei		#792-A-PCT-US 7677				
TITLE OF INVENTION: R			_	4					
APPLN, TYPE	SMALL ENTITY	ISSUE FER DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TOTAL FEE(S) DU	E DATE DUE			
nonprovisional	YES	\$720	\$300	\$0	\$1020	03/12/2008			
EXAMINE	ER.	ART UNIT	CLASS-SUBCLASS			,			
HISSONG, BR	UCED	1646	424-085700						
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	ence address (or Char (2) attached.	age of Correspondence	or agents OR, alternati (2) the name of a sing registered attorney or	of up to 3 registered patent attorneys alternatively, of a single firm (having as a member a single firm (having as a member a step or agent) and the names of up to attent attorneys or agents. If no name is					
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Please check the appropriate	assignee category or o	ategories (will not be pr	inted on the patent) :	Individual 🛭 Co	rporation or other private g	roup entity Government			
4a. The following fee(s) are s ✓ Issue Fee ✓ Publication Fee (No sn — Advance Order - # of	nall entity discount pe	rmitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1891 (enclose an extra copy of this form).						
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Authorized Signature	alles u	Dai Kit C	Die	_{Date} March	า 7, 2008				
Typed or printed name A	lbert Wai-Kit	Chan		Date March Registration N	_{o.} 36,479				
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